ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | 'D NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | NUREDIN | | 07-25-01 |
| FORMALITY REVIEW | ?? | 853 | 08-02-01 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

| ✔ | .............................. Rejected | N | .............................. Non-elected |
|---|---|---|---|
| = | .............................. Allowed | I | .............................. Interference |
| — | (Through numeral)... Canceled | A | .............................. Appeal |
| ÷ | .............................. Restricted | O | .............................. Objected |

| Claim Final | Original | Date | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | 1 | | ✓ | | | | | | | |
| | 2 | | ✓ | | | | | | | |
| | 3 | | ✓ | | | | | | | |
| | 4 | | ✓ | | | | | | | |
| | 5 | | ✓ | | | | | | | |
| | 6 | | ✓ | | | | | | | |
| | 7 | | ✓ | | | | | | | |
| | 8 | | | | | | | | | |
| | 9 | | ✓ | | | | | | | |
| | 10 | ✓ | ✓ | | | | | | | |
| | 11 | ✓ | ✓ | | | | | | | |
| | 12 | ✓ | ✓ | | | | | | | |
| | 13 | | ✓ | | | | | | | |
| | 14 | | ✓ | | | | | | | |

(Claims 15–150 blank)

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)